

<b>AUDITOR / CONTROLLER'S USE</b>		EL DORADO COUNTY APPROPRIATION TRANSFER ( 29125 GOV. CODE )		<b>BUDGET TRANSFER REQUEST</b>		<b>DOCUMENT TOTAL</b>	<b>\$200,000.00</b>
<b>TRANSFER #</b>		<b>BUDGET TRANSFER #1 - INCREASING TOTAL APPROPRIATIONS, REVENUES, OR FIXED ASSETS REQUIRES BOS APPROVAL</b>  <b>BUDGET TRANSFER #2 - MOVING APPROPRIATIONS or REVENUE BETWEEN CLASSIFICATIONS REQUIRES CAO APPROVAL</b>		<b>NUMBER OF LINES</b>	<b>2</b>	<b>NET TOTAL</b>	<b>\$0.00</b>
<b>JOURNAL #</b>							
<b>DATE</b>							
<b>INPUT BY</b>							
<b>TO BE COMPLETED BY DEPARTMENT</b>		<b>Budget Transfer Type:</b>	Transfer 1: BoS Approval				
<b>DEPT NAME</b>	Planning and Building	<b>Legistar Number &amp; Date:</b>	25-0125, 02/11/25				
<b>DEPT CONTACT &amp; EXT.</b>	Stephanie Lisius X 5851	<i>Becky Morton</i> <small>Becky Morton (Jan 9, 2025 08:57 PST)</small>		<i>Karen L. Garner</i> <small>Karen L. Garner (Jan 9, 2025 09:15 PST)</small>		<b>1/6/2025</b>	<b>PAGE 1 OF 1</b>
DEPARTMENT AUTHORIZATION SIGNATURE AND DATE						DATE	

**DIRECTIONS:**

1. MEMO REQUIRED, IF BOS, INCLUDE A COPY OF THE LEGISTAR MASTER REPORT
2. REMOVE THE GREEN COPY AND SUBMIT COMPLETED REQUEST TO THE CHIEF ADMINISTRATIVE OFFICE
3. IF BUDGET TRANSFER EXCEEDS 12 LINES, EMAIL EXCEL WORKBOOK TO APINTERFACES AND CAO ANALYST

S F X	Budget Rollup Code	ORG	OBJECT	PROJECT STRING	GL Project	INCREASE OR DECREASE (INC / DEC)	AMOUNT	DESCRIPTION (30 CHARACTERS MAX.)
1		3740000	0880	37400000-37BUDGET		INC	\$ 100,000	INC STATE REVENUE LATA GRANT
2	37400	3740000	4300	37400000-37BUDGET		INC	\$ 100,000	INC PROF SERV LATA GRANT
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

<p>_____</p> <p style="text-align:center;">JOE HARN, C.P.A. AUDITOR / CONTROLLER      DATE</p> <p>_____</p> <p style="text-align:center;">CHIEF ADMINISTRATIVE OFFICE - ANALYST      DATE</p> <p>_____</p> <p style="text-align:center;">CHIEF ADMINISTRATIVE OFFICER      DATE</p>	<p style="text-align:center;">APPROVED AND SO ORDERED THAT THE ABOVE TRANSFERS BE MADE (AS REQUESTED OR AMMENDED) AND INCORPORATED IN THE MINUTES OF THIS MEETING OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO</p> <p>_____</p> <p style="text-align:center;">SIGNATURE: CHAIR, BOARD OF SUPERVISORS      DATE</p> <p>_____</p> <p style="text-align:center;">ATTEST: CLERK, BOARD OF SUPERVISORS      DATE</p>
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**MEMO SHEET: BUDGET TRANSFER INFORMATION**

<b>Department Name*</b>	Planning and Building	<b>Budget Transfer Type:</b>	Transfer 1: BoS Approval
<b>Clerk*</b>	Stephanie Lisius	<b>Document total*</b>	\$ 200,000
<b>Contact phone*</b>	5851		

**BUDGET TRANSFER HEADER**

<b>Prepared date*</b>	01/06/25	<b>Check Applicable*</b> <input checked="" type="checkbox"/> One Time (after Adopted Budget) <input type="checkbox"/> Continuing (include in the Adopted Budget)
<b>Fiscal year</b>	24/25	
<b>Short Description*</b> <small>(10 characters)</small>	INCPROSRV	
	<b>Registrar Item Number*</b>	25-0125, 02/11/25
<b>* REQUIRED FIELDS</b>	<b>Project Strings Required:</b>	Yes

**By signing this memo I hereby certify that:**  
1. information herein is true and accurate to the best of my knowledge, 2. I have been delegated signature authority in accordance with County's policies and procedures and 3. all transfers approved on this journal are in compliance with County policies and procedures and any other relevant governmental regulations.

<i>Becky Morton</i> <small>Becky Morton (Jan 9, 2025 08:57 PST)</small>	<b>Authorized signature*</b> <i>Karen L. Garner</i> <small>Karen L. Garner (Jan 9, 2025 09:15 PST)</small>
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**BUDGET TRANSFER JUSTIFICATION AND DESCRIPTION\*** (will be scanned into FENIX TCM)

Planning and Building Department, Economic Development division (Department) is requesting a budget transfer increasing professional services by \$100,000 offset by an increase to state revenue. The Department received a Local Agency Technical Assistance grant in the amount of \$500,000. At the time the budget was developed it was anticipated that some of the work would be completed in prior budget years; however all work was completed and billed in fiscal year 2024/25.

**FOR AUDITOR'S OFFICE USE ONLY**

Audit date:	_____	Budget Transfer number:	_____
Audited by:	_____	Interfaced by:	_____
		Processed on:	_____